

| ORDER FOR SUPPLIES OR SERVICES | | | | | | | | | | Page 1 Of 4 | |
|--|----------------------|---|---|---|--|-----------------------------|---|--|---|--|--|
| 1. Contract/Purch Order/Agreement No. DAAE20-98-D-0028 | | | 2. Delivery Order/Call No. 0004 | | 3. Date Of Order/Call (YYYYMMDD) 2001JUL03 | | 4. Requisition/Purch Request No. SEE SCHEDULE | | | 5. Priority DOA5 | |
| 6. Issued By TACOM-ROCK ISLAND AMSTA-LC-CTR-R CHERYL MAU (309)782-4947 ROCK ISLAND IL 61299-7630 EMAIL: MAUC@RIA.ARMY.MIL | | | | Code W52H09 | 7. Administered By (If other than 6) DCM TWIN CITIES 3001 METRO DRIVE BLOOMINGTON MN 55425-1573 SCD C PAS NONE ADP PT SC1002 | | | | Code S2401A | 8. Delivery FOB <input type="checkbox"/> Destination <input checked="" type="checkbox"/> Other (See Schedule if other) | |
| 9. Contractor LCL ELECTRONICS 1480 INDUSTRIAL PARK ROAD BAXTER MN 56401 Name and Address TYPE BUSINESS: Other Small Business Performing in U.S. | | | Code 2Y430 | Facility | 10. Deliver To FOB Point By (Date) (YYYYMMDD) SEE SCHEDULE | | | 11. X If Business Is <input type="checkbox"/> Small <input type="checkbox"/> Small Disadvantaged <input checked="" type="checkbox"/> Woman-Owned | | | |
| | | | | | 12. Discount Terms | | | 13. Mail Invoices To the Address in Block See Block 15 | | | |
| 14. Ship To SEE SCHEDULE | | | Code | 15. Payment Will Be Made By DFAS-COLUMBUS CENTER DFAS-CO-JWB/GATEWAY P O BOX 182251 COLUMBUS OH 43218-2251 | | | | Code SC1028 | Mark all Packages and Papers with Identification Numbers in Blocks 1 and 2 | | |
| 16. Type of Order | Delivery/Call | X | This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract. | | | | | | | | |
| | | | Reference your <input type="checkbox"/> Oral; <input type="checkbox"/> Written Quotation , Dated furnish the following on terms specified herein. | | | | | | | | |
| Purchase | | | Acceptance. The Contractor Hereby Accepts The Offer Represented By The Numbered Purchase Order As It May Previously Have Been Or Is Now Modified, Subject To All Of The Terms And Conditions Set Forth, And Agrees To Perform The Same. | | | | | | | | |
| Name Of Contractor | | | Signature | | | Typed Name And Title | | | Date Signed (YYYYMMDD) | | |
| <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: | | | | | | | | | | | |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE | | | | | | | | | | | |
| 18. Item No. | | 19. Schedule Of Supplies/Service SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price | | | 20. Quantity Ordered/ Accepted* | | 21. Unit | 22. Unit Price | 23. Amount | | |
| | | KIND OF CONTRACT: Supply Contracts and Priced Orders | | | | | | | | | |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle. | | | | 24. United States Of America By: JUDY BECHTLER-HOLZER /SIGNED/ BECHTLER-HOLZERJ@RIA.ARMY.MIL (309)782-8530 | | | | 25. Total | \$32,500.00 | | |
| 26. Quantity In Column 20 Has Been <input type="checkbox"/> Inspected <input type="checkbox"/> Received <input type="checkbox"/> Accepted And Conforms To Contract Except As Noted _____ Date Signature Of Authorized Govt Representative | | | | 27. Ship. No. <input type="checkbox"/> Partial <input type="checkbox"/> Final | | 28. D.O. Voucher No. | | 29. Differences | | | |
| 36. I certify this account is correct and proper for payment _____ Date Signature And Title Of Certifying Officer | | | | 31. Payment <input type="checkbox"/> Complete <input type="checkbox"/> Partial <input type="checkbox"/> Final | | 32. Paid By | | 30. Initials | | | |
| | | | | | | | | 33. Amount Verified Correct For | | | |
| | | | | | | | | 34. Check Number | | | |
| | | | | | | | | 35. Bill Of Lading No. | | | |
| 37. Received At | | 38. Received By | | 39. Date Received | | 40. Total Containers | 41. S/R Account Number | | 42. S/R Voucher No. | | |
| | | | | | | | | | | | |

| | | |
|---|---|---------------------------|
| CONTINUATION SHEET | Reference No. of Document Being Continued PIIN/SIIN DAAE20-98-D-0028/0004 MOD/AMD | Page 2 of 4 |
| Name of Offeror or Contractor: LCL ELECTRONICS | | |

SUPPLEMENTAL INFORMATION

- 1. DELIVERY ORDER 0004 IS AWARDED FOR THE FOLLOWING ITEM:

CLIN 0003, CIRCUIT CARD ASSEMBLY, NSN: 5999-01-206-0262, QTY: 50 EACH
- 2. THIS ORDER IS AWARDED UNDER THE TERMS AND CONDITIONS OF CONTRACT DAAE20-98-D-0028.
- 3. ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: LCL ELECTRONICS

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|---|----------|------|--------------|--------------|
| 0003 | <div>SUPPLIES OR SERVICES AND PRICES/COSTS</div> <div>Supplies or Services and Prices/Costs</div> <div>PRODUCTION QUANTITY</div> <div>NSN: 5999-01-206-0262 NOUN: CIRCUIT CARD ASSEMB FSCM: 19200 PART NR: 9366034 SECURITY CLASS: Unclassified PRON: M111CB24M1 PRON AMD: 01 ACRN: AA AMS CD: 0700116PRET</div> <div>Packaging and Marking</div> <div>Inspection and Acceptance</div> <div>INSPECTION: Origin ACCEPTANCE: Origin</div> <div>Deliveries or Performance</div> <div>DOC SUPPL</div> <div>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</div> <div>001 W52H091178A551 W45G19 J 2</div> <div>DEL REL CD QUANTITY DEL DATE</div> <div>001 50 31-DEC-2001</div> <div>FOB POINT: Origin</div> <div>SHIP TO: FREIGHT ADDRESS</div> <div>(W45G19) XU W390 RED RIVER MUNITIONS CTR RECEIVING BLDG 499 10 ST AND K AVE TEXARKANA TX 75507-5000</div> <div>CONTRACT/DELIVERY ORDER NUMBER</div> <div>DAAE20-98-D-0028/0004</div> | 50 | EA | \$ 650.00000 | \$ 32,500.00 |

CONTINUATION SHEET

Reference No. of Document Being Continued

Page 4 of 4

PIIN/SIIN DAAE20-98-D-0028/0004

MOD/AMD

Name of Offeror or Contractor: LCL ELECTRONICS

CONTRACT ADMINISTRATION DATA

| LINE | PRON/ | OBLG | | | | | | JOB | | | |
|-------------|------------|------|------|---------------------------|-----------|----|------|--------|------------|-----------|-----------|
| ITEM | AMS CD | ACRN | STAT | ACCOUNTING CLASSIFICATION | | | | ORDER | ACCOUNTING | OBLIGATED | |
| | | | | | | | | NUMBER | STATION | AMOUNT | |
| 0003 | M111CB24M1 | AA | 2 | 97 | X4930AC6G | 6D | 26FB | S11116 | W52H09 | \$ | 32,500.00 |
| 0700116PRET | | | | | | | | | | | |
| | | | | | | | | | TOTAL | \$ | 32,500.00 |

| SERVICE | | | | | | ACCOUNTING | OBLIGATED |
|-------------|----------------------|----------------------------------|-----------|----|----------------|---------------|--------------|
| <u>NAME</u> | <u>TOTAL BY ACRN</u> | <u>ACCOUNTING CLASSIFICATION</u> | | | <u>STATION</u> | <u>AMOUNT</u> | |
| Army | AA | 97 | X4930AC6G | 6D | 26FB S11116 | W52H09 | \$ 32,500.00 |
| | | | | | | TOTAL | \$ 32,500.00 |